

Date

7-10-09

Permit No.

09-20

TOWN OF ACTON

APPLICATION FOR PERMIT TO CONSTRUCT WITHIN A PUBLIC WAY

This application must be submitted not less than five (5) days prior to any Construction within a public way.

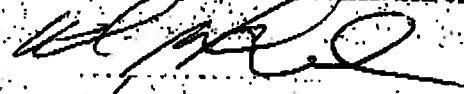
Notice 24 hours in advance of any construction must be given to the Town Engineer.

1. Permittee: NationalGrid Address: 40 Sylvan Rd WALTHAM, MA 02451
 1A. Telephone #: 781-907-2898
 2. Location of Proposed Construction: Charter Rd - near Pole #12
 3. Purpose of Construction: CORROSION WORK
 4. Length of Cut: 4'
 5. Width of Cut: 5'
 6. Width of Existing Pavement:
 7. Type of Existing Roadway Surface: Asphalt Type of Curb:
 8. Type of Existing Sidewalk Surface: Type of Shoulder:
 9. Date of Street Opening: From To
 10. For Work Involving Excavations: Dig Safe Number 2009-280-2371

I, the undersigned, hereby declare that I have read and agree to the Town of Acton Specifications for Regulating Construction with Public Ways dated January 8, 1991. I have deposited the required bond with the Town of Acton, and I covenant and agree that the Town may deduct from this amount the cost of repairs to the road surface, curbs, shoulders, walls or other features within the right-of-way including replacing bounds if not completed by me to the satisfaction of the Town Engineer within the specified time.

Special Instructions:

Signature of Applicant:



- This section of Charter Road has been discontinued by the Town.
 - You will need to seek permission from the School Dept for this work

Permit Issued: Date

By:

Application Denied: Date

By:

Work Inspected and Approved: Date

By:

(over)



Town of Acton
 Building Department
 472 Main St Acton Massachusetts 01720
 Phone (978) 264-9632
 FAX (978) 264-9630

Permit Number 709-52
 Date Issued 7/10/09
 Expiration Date _____

TRENCH PERMIT

Pursuant to G.L. c. 82A §1 and 520 CMR 7.00 et seq.(as amended)

THIS PERMIT MUST BE FULLY COMPLETED PRIOR TO CONSIDERATION

Name of Applicant <u>National Grid</u>		Phone _____		Cell _____	
Street Address <u>40 Sylvan Rd</u>		781-907-2898			
City/Town <u>Waltham</u>	MA <u>02451</u>	ZIP <u>02451</u>			
Name of Excavator (if different from applicant) <u>Same</u>		Phone _____		Cell _____	
Street Address _____					
City/Town _____	MA _____	ZIP _____			
Name of Owner(s) of Property _____		Phone _____		Cell _____	
Street Address _____					
City/Town _____	MA _____	ZIP _____			
Other Contact _____		Permit Fee Received No () Yes (x)			
Description, location and purpose of proposed trench: <u>CORROSION WORK</u>					
Please describe the exact location of the proposed trench and its purpose (include a description of what is (or is intended) to be laid in proposed trench (eg; pipes/cable lines etc..). Please use reverse side if additional space is needed.					
<u>ADDRESS: CHARTER RD - NEAR POLE #12</u>					
Insurance Certificate #: <u>Self Insured</u>					
Name and Contact Information of Insurer: <u>Tim Kiernan 718-403-2986</u>					
Policy Expiration Date: <u>7/2010</u>					
Dig Safe #: <u>2009-280-2371</u>					
Name of Competent Person (as defined by 520 CMR 7.02): <u>See list</u>					

Massachusetts Hoisting License #	
License Grade: <u>See list</u>	Expiration Date:

BY SIGNING THIS FORM, THE APPLICANT, OWNER, AND EXCAVATOR ALL ACKNOWLEDGE AND CERTIFY THAT THEY ARE FAMILIAR WITH, OR, BEFORE COMMENCEMENT OF THE WORK, WILL BECOME FAMILIAR WITH, ALL LAWS AND REGULATIONS APPLICABLE TO WORK PROPOSED, INCLUDING OSHA REGULATIONS, G.L. c. 82A, 820 CMR 7.00 et seq., AND ANY APPLICABLE MUNICIPAL ORDINANCES, BY-LAWS AND REGULATIONS AND THEY COVENANT AND AGREE THAT ALL WORK DONE UNDER THE PERMIT ISSUED FOR SUCH WORK WILL COMPLY THEREWITH IN ALL RESPECTS AND WITH THE CONDITIONS SET FORTH BELOW:

THE UNDERSIGNED OWNER AUTHORIZES THE APPLICANT TO APPLY FOR THE PERMIT AND THE EXCAVATOR TO UNDERTAKE SUCH WORK ON THE PROPERTY OF THE OWNER, AND ALSO, FOR THE DURATION OF CONSTRUCTION, AUTHORIZES PERSONS DULY APPOINTED BY THE MUNICIPALITY TO ENTER UPON THE PROPERTY TO MONITOR AND INSPECT THE WORK FOR CONFORMITY WITH THE CONDITIONS ATTACHED HERETO AND THE LAWS AND REGULATIONS GOVERNING SUCH WORK.

THE UNDERSIGNED APPLICANT, OWNER AND EXCAVATOR AGREE JOINTLY AND SEVERALLY TO REIMBURSE THE MUNICIPALITY FOR ANY AND ALL COSTS AND EXPENSES INCURRED BY THE MUNICIPALITY IN CONNECTION WITH THIS PERMIT AND THE WORK CONDUCTED THEREUNDER, INCLUDING BUT NOT LIMITED TO ENFORCING THE REQUIREMENTS OF STATE LAW AND CONDITIONS OF THIS PERMIT, INSPECTIONS MADE TO ASSURE COMPLIANCE THEREWITH, AND MEASURES TAKEN BY THE MUNICIPALITY TO PROTECT THE PUBLIC WHERE THE APPLICANT OWNER OR EXCAVATOR HAS FAILED TO COMPLY THEREWITH INCLUDING POLICE DETAILS AND OTHER REMEDIAL MEASURES DEEMED NECESSARY BY THE MUNICIPALITY.

THE UNDERSIGNED APPLICANT, OWNER AND EXCAVATOR AGREE JOINTLY AND SEVERALLY TO DEFEND, INDEMNIFY, AND HOLD HARMLESS THE MUNICIPALITY AND ALL OF ITS AGENTS AND EMPLOYEES FROM ANY AND ALL LIABILITY, CAUSES OR ACTION, COSTS, AND EXPENSES RESULTING FROM OR ARISING OUT OF ANY INJURY, DEATH, LOSS, OR DAMAGE TO ANY PERSON OR PROPERTY DURING THE WORK CONDUCTED UNDER THIS PERMIT.

APPLICANT SIGNATURE

Harold L... DATE 7-9-09

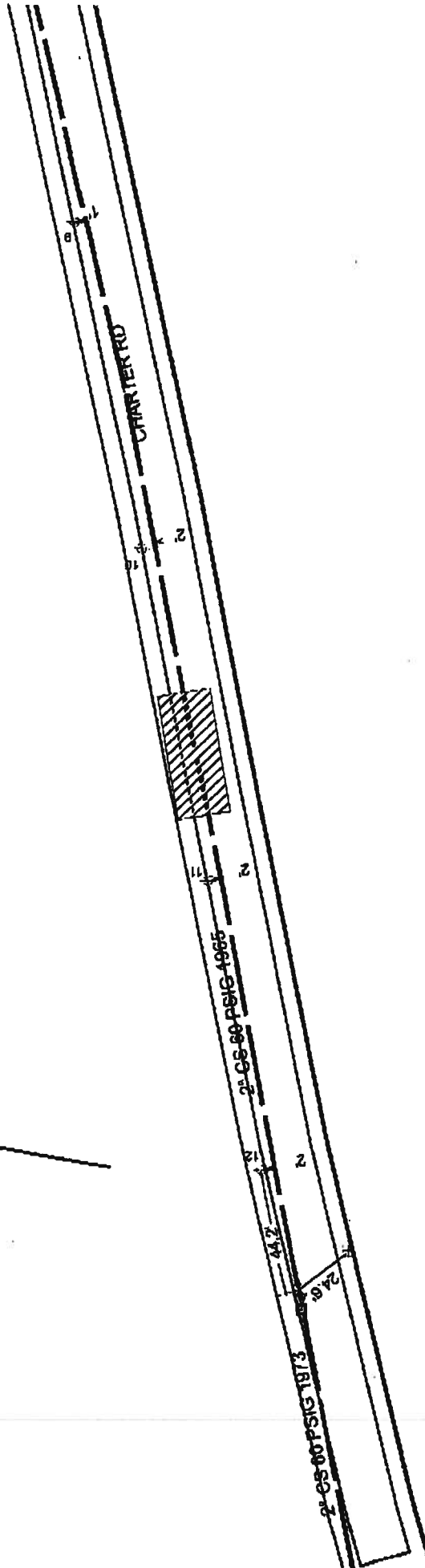
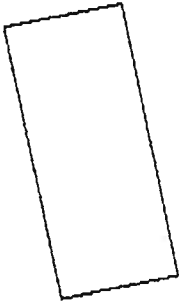
EXCAVATOR SIGNATURE (IF DIFFERENT)

DATE _____

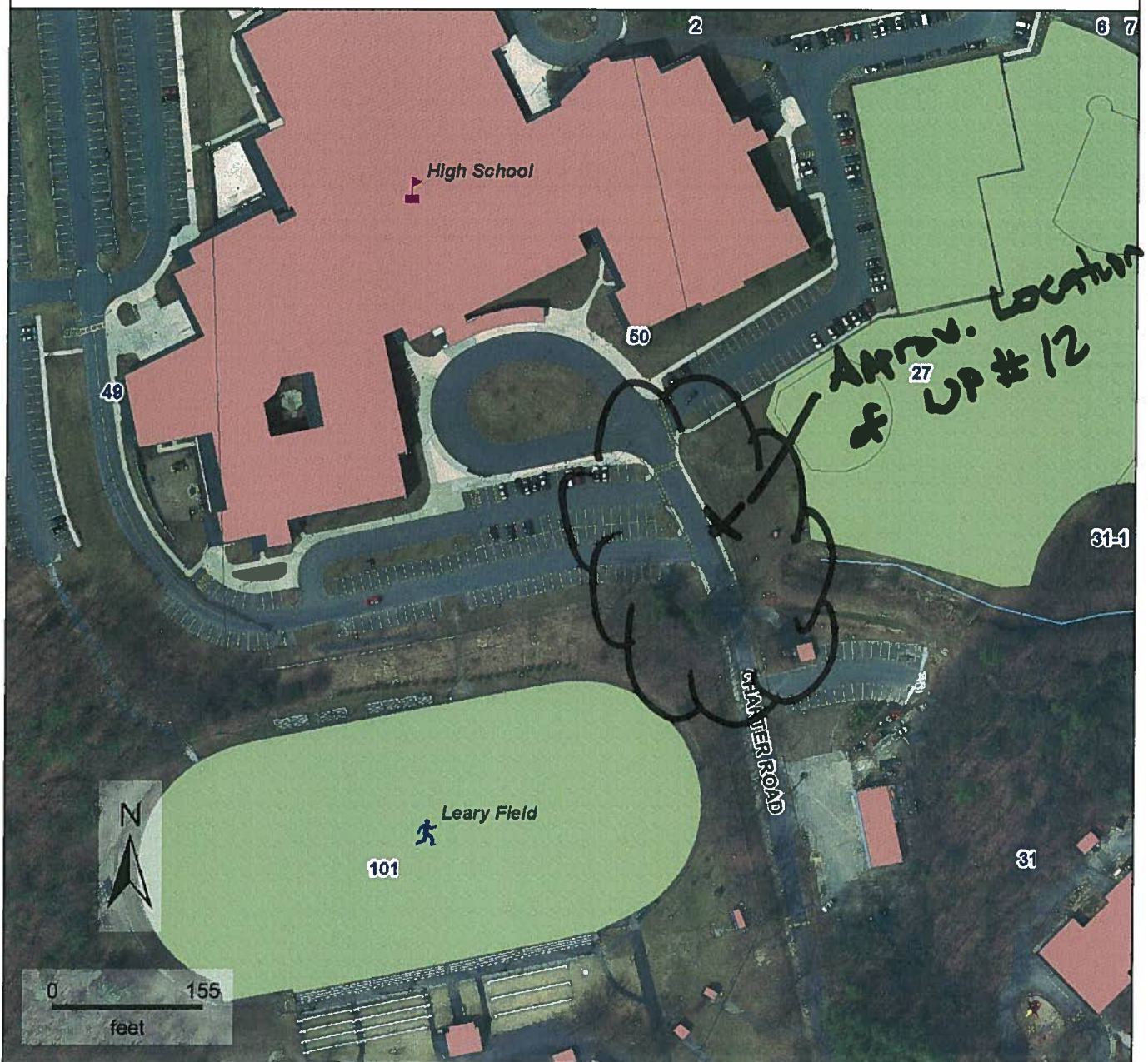
OWNER'S SIGNATURE (IF DIFFERENT)

DATE: _____





Charter Road - UP #12



Property Information

Property ID
Location



MAP FOR REFERENCE ONLY
NOT A LEGAL DOCUMENT

This data set/map is for planning purposes only and should not be used for larger scale analysis. The Town of Acton shall not be held liable for any use of the data or images shown on this map, nor is any warranty of accuracy expressed. All uses of this data set/map are subject to field verification.

